



Schedule E - Rental Property Income and Expense Worksheet

Property address _____

Did you dispose of this property this year? Y ___ N ___

Did you or your family use this property for personal purposes for more than 14 days or 10% of the total days rented? Y ___ N ___

Income

Rents received _____

Other Income (please provide details) _____

Expenses

Advertising _____

Vehicle expenses _____

Total miles _____ Total miles traveled to property _____

Cleaning & maintenance _____

Commissions & fees _____

Insurance (other than health insurance) _____

Legal & professional services _____

Management fees _____

Mortgage interest (paid to financial institutions) _____

Other interest _____

Repairs _____

Supplies _____

New appliances, furnishings, improvements _____

(please provide description, cost, and date put in service on reverse side)

Taxes _____

Utilities _____

Other expenses (provide details): _____

I certify that the information above was provided by me from receipts and documentation in my possession, and to the best of my knowledge, it is accurate and complete.

Signature _____

Date _____